



Nevada Division of Insurance

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APPLICATION FOR WRITTEN CONSENT 18 U.S.C. § 1033& 1034 SHORT FORM CHECKLIST

<u>Section / Description</u>		<u>Complete? Y/N</u>			
Section I.	Application Information	[]	Y	[]	N
	Photos	[]	Y	[]	N
	If no, incomplete items (s): _____				
Section II.					
1.	All Felonies				
	A. List of Felonies	[]	Y	[]	N
	B. Date, location, nature of offense	[]	Y	[]	N
	C. Plea Information	[]	Y	[]	N
	D. Full Description (attach)	[]	Y	[]	N
2.	Disposition				
	A. Sentence	[]	Y	[]	N
	B. Dates of Incarceration	[]	N/A	[]	Y
	C. Dates of Probation/Parole	[]	N/A	[]	Y
	(Include name and telephone number of parole/probation officer)	[]	Y	[]	N
	D. Restitution/Fines/Costs	[]	N/A	[]	Y
	E. Civil and Political Rights Restored?	[]	Y	[]	N
Section III.	Present/Proposed Insurance Employment				
	1. Employer's Name and Address	[]	Y	[]	N
	2. Position Description	[]	Y	[]	N
	(With attached agreements, if applicable)				
Section IV.	Required Attachments				
	1. Certified Copy of Criminal History	[]	Y	[]	N
	2. Certified Copy of Indictment	[]	Y	[]	N
	3. Certified Copy of Judgement and Sentence	[]	Y	[]	N
	4. Insurer Affidavit	[]	Y	[]	N
	Page 4 Signed and Notarized?	[]	Y	[]	N

This checklist is provided in order to assist you in providing all required documentation necessary to determine your qualifications for a license in compliance with 18 U.S.C. § 1033 and 1034.

